

Exhibit A

TRADE NAME APPLICATION

(1) Trade Name *(only one Trade Name may appear here)*:

The Valley (T00490129)

(2) Street address(es) where name is used *(P.O. Box number is only accepted when part of the physical address)*:

19120 Muncaster Road
Rockville, MD 20855

(3) Full Legal Name of Owner of Business or Individual Using the Trade Name:

Hagerstown Recovery LLC

(4) Department ID *(if applicable)*:

W20632758

(5) Address of Owner *(P.O. Box number is only accepted when part of the physical address)*:

30 courthouse sq #206
Rockville, MD 20850

(6) Description of Business:

The residential substance abuse care.

I affirm and acknowledge under penalties of perjury that the foregoing is true and correct to the best of my knowledge.

Signature(s) of Owner(s):

James Peters, Attorney

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